IAN 1 9 2007 W			DT0/02014 (00.00)		
5		U.S. Patent and Tradem	PTO/SB/21 (09-06) vved for use through 03/31/2007. OMB 0651-0031 lark Office; U.S. DEPARTMENT OF COMMERCE		
Ordes the Panel Offic Reduction Act of 1995, no per	sons are required to res	Application Number	ation unless it displays a valid OMB control number.		
TRANSMITT	AL	Filing Date	July 12, 2006		
FORM		First Named Inventor	Håkan Fortell		
		Art Unit	Not Yet Assigned		
(to be used for all correspondence afte	r initial filing)	Examiner Name	Not Yet Assigned		
Total Number of Pages in This Submis		Attorney Docket Numb	er 43314-232150		
EN	ICLOSURES	(Check all that app	nly)		
x Fee Transmittal Form	Drawing(s)		After Allowance Communication to TC		
Fee Attached	Licensing-rel	ated Papers	Appeal Communication to Board of Appeals and Interferences		
Amendment/Reply	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
		onvert to a application	Proprietary Information		
		mey, Revocation prespondence Address	Status Letter		
Extension of Time Request Termi		claimer	X Other Enclosure(s) (please Identify below):		
Express Abandonment Request Requ		Refund	PTO/SB/08A w/ 8 cited references		
x Information Disclosure Statement	CD, Number	of CD(s)			
Certified Copy of Priority Document(s)		cape Table on CD			
Reply to Missing Parts/ Incomplete Application	Remarks	1, -, 4 <i>1</i> -74			
Reply to Missing Parts under					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm Name VENABLE LLP		7			
Signature					
Printed name Eric J. Franklin	Y				
Date January 19, 2007		Reg. No.	37,134		

PTO/SB/17 (07-06) Approved for use through 01/31/2007. OMB 0651-0032

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2006 Application Number Application Number First Named Inventor Examiner Name Not Yet Assigned Att Unit Not Yet Assigned Attorney Docket No. METHOD OF PAYMENT Check Credit Card Money Order None Check Credit Card Money Order None Check Credit Card Money Order None Charge fee(s) indicated below Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION Application Number 10/585,726 Filling Date July 12, 2006 First Named Inventor Håkan Fortell Examiner Name Not Yet Assigned Att Unit Not Yet Assigned Other (please identify): Venable LLP Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee X Credit any overpayments FEE CALCULATION	Under the Engryorio Registren Act of 1995, no person are required to			ARTMENT OF COMMERCE a valid OMB control number				
FEE TRANSMITTAL For FY 2006 Applicant claims small entity status. See 37 CFR 1.27 Application Number July 12, 2006 Filtry 1 2006 Applicant claims small entity status. See 37 CFR 1.27 Art Unit Not Yet Assigned Art Unit Not Yet Assigned Attorney Docket No. 43314-232150 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number 22-0261 Deposit Account Number 22-0261 Deposit Account Deposit Account Number 22-0261 Deposit Account Number 22-0261 Deposit Account Deposit Account Number 22-0261 Deposit Account Number 22-0261 Charge fee(s) indicated below Charge fee(s) Charge fee(s) Charge fee(s) Charge fee(s) Charge fee(s) Charge fee(s) Charge fe		Taspona to a conscitor of in						
FEE TRANSMITTAL For FY 2006 Appicant claims small entity status. See 37 CFR 127 Appicant claims small entity status. See 37 CFR 127 Appicant claims small entity status. See 37 CFR 127 Appicant claims small entity status. See 37 CFR 127 Attuit		Application Number						
For FY 2006 First Named Inventor Håkan Fortell			11 40 0000					
Applicant claims small entity status. See 37 CFR 1.27	•		r Håkan Fortell	"				
METHOD OF PAYMENT (check all that apply)	For FY 2006			ed				
METHOD OF PAYMENT (check all that apply) Check	Applicant claims small entity status. See 37 CFR 1.27	Art Unit	Not Yet Assigne	ed				
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number 22-0261 Deposit Account Name: Venable LLP	TOTAL AMOUNT OF PAYMENT (\$) 0.00	Attorney Docket No.	43314-232150					
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number 22-0261 Deposit Account Name: Venable LLP	METHOD OF PAYMENT (check all that apply)							
Deposit Account Deposit Account Number 22-0261 Deposit Account Name: Venable LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Application Type Fee (\$) Fe		one Other (pleas	e identify):					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below, except for the filing fee fee(s) indicated below. Except fee(s) indicated below. Except fee(s) indicated below. Examination fee(s) ind		count Name:	Venable LLF	•				
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee X			(check all that apply)					
X Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 X Credit any overpayments				cept for the filing fee				
Tee(s) under 37 CFR 1.16 and 1.17		, =						
Search S	fee(s) under 37 CFR 1.16 and 1.17	x Credit any	overpayments					
Filling FEES Small Entity Fee (\$) Fee								
Application Type	1. BASIC FILING, SEARCH, AND EXAMINATION FEES		ANAINIATION FEFO					
Application Type								
Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 0 0 0 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each claim over 3 (including Reissues) Fee Question (including Reissues) Each independent claims Total Claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims 15				Fees Paid (\$)				
Plant 200 100 300 150 160 80	Utility 300 150 500	250 2	200 100					
Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 0 0 0 0 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Application size FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets of fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof. Fee (\$) Fee Paid (\$) Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Total Sheets Fee Paid (\$)	Design 200 100 100	50	130 65					
Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Plant 200 100 300	150	160 80					
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claims Total Claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Application and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)	Reissue 300 150 500	250	600 300					
Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims	Provisional 200 100 0	0	0 0					
Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims 15	2. EXCESS CLAIM FEES							
Each independent claims Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims 15 -20 =								
Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Sextra Claims Fee (\$) Fee Paid (\$) Bee Paid (\$) Another Pee Paid (\$) Another Pee Paid (\$) Total Sheets Extra Sheets Number of each additional 50 or fraction thereof free Paid (\$) Total Sheets Fee (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Signature Multiple Dependent Claims Fee (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$)				200 100				
Total Claims 15	-			360 180				
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) 3 -3 =		Paid (\$)	Multiple Depende	nt Claims				
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) 3			Fee (\$)	ee Paid (\$)				
3 -3 = x = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets								
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof 100 = 150 (round up to a whole number) x = 100 =		Paid (\$)						
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof -100 =								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets								
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof -100 = /50 (round up to a whole number) x = Fee Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): SUBMITTED BY Signature Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) 37,134 Telephone (202) 344-4936	3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof -100 =	listings under 37 CFR 1.52(e)), the application size fee of	ue is \$250 (\$125 for si	mall entity) for each ac	lditional 50				
- 100 = /50 (round up to a whole number) x =	sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) an	d 37 CFR 1.16(s).						
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): SUBMITTED BY Signature Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) 37,134 Telephone (202) 344-4936				Fee Paid (\$)				
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): SUBMITTED BY Signature Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) 37,134 Telephone (202) 344-4936		_ (round up to a whole no	ımper) x	Fooe Paid (\$)				
Other (e.g., late filing surcharge): SUBMITTED BY Signature Registration No. (202) 344-4936 (Attorney/Agent) 37,134 Telephone (202) 344-4936	* *	count)		rees raiu (1)				
SUBMITTED BY Signature Registration No. (Attorney/Agent) 37,134 Telephone (202) 344-4936	•	count)						
Signature Registration No. (Attorney/Agent) 37,134 Telephone (202) 344-4936								
Signature (Attorney/Agent) 37, 134 Total (202) 344-4333		Registration No	7.404	(202) 244 4026				
Name (Print/Type) Eric J. Franklin Date January 19, 2007	Signature (MWil)WW	(Attorney/Agent) 37						
	Name (Print/Type) Eric J. Franklin		Date	January 19, 2007				



Docket No.: 43314-232150

(PATENT)

VINTHE INITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Fortell et al.

Art Unit: Not Yet Assigned

Application No: 10/585,726

Examiner: Not Yet Assigned

Confirmation No: tba

Atty. Docket No: 43314-232150

Filed: July 12, 2006

Customer No:

For: CONTROL SYSTEM, METHOD AND

26694

COMPUTER PROGRAM FOR

U.S. PATENT AND TRADEMARK

SYNCHRONIZING SEVERAL ROBOTS

OFFICE

INFORMATION DISCLOSURE STATEMENT (IDS)

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Enclosed is a PTO-1449 and copies of references cited therein.

This Information Disclosure Statement is being filed before the mailing date of a first Office Action on the merits.

The undersigned authorizes the Director to charge any fee deficiency associated with this communication to Deposit Account No. 22-0261, under Order No. 43314-232150.

Dated: January 19, 2007

Respectfully submitted,

Eric J. Franklin, Registration No.: 37,134

VENABLE LLP P.O. Box 34385

Washington, DC 20043-9998

(202) 344-4000

(202) 344-8300 (Fax)

Attorney/Agent For Applicant

PTO/SB/08A/B (09-06)
Approved for use through 03/31/2007. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE ct of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form				Complete if Known		
"	Capatitate in initi i-capa-i-a			Application Number	10/585,726	
l IN	NFORMATION	N DI	SCLOSURE	Filing Date	July 12, 2006	
l s	STATEMENT BY APPLICANT (Use as many sheets as necessary)			First Named Inventor	Håkan Fortell	
				Art Unit	Not Yet Assigned	
1				Examiner Name	Not Yet Assigned	
Sheet	1	of	1	Attorney Docket Number	43314-232150	

U.S. PATENT DOCUMENTS						
Examiner	Cite	Document Number	Publication Date	Name of Patentee or	Pages, Columns, Lines, Where	
Initials*	No.1	Number-Kind Code ² (if known)		Applicant of Cited Document	Relevant Passages or Relevant Figures Appear	
	AA*	US-20030220715	11-27-2003	KNEIFEL II et al.		
	AB*	US-5,254,923-A	10-19-1993	KANITANI		
	AC*	US-20040030452-A1	02-12-2004	GRAF et al.		

		FOREI	GN PATENT D	OCUMENTS		_
Examiner Initials*	Cite No.1	Foreign Patent Document Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	Т6
	ВА	-EP 1464452-A2	10-06-2004			
	ВВ	-WO 03103903-A1	12-18-2003			
	ВС	-EP 1090722-A2	04-11-2001			
	BD	-EP 0377939-A1	07-18-1990			

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. * CITE NO.: Those application(s) which are marked with an single asterisk (*) next to the Cite No. are not supplied (under 37 CFR 1.98(a)(2)(iii)) because that application was filed after June 30, 2003 or is available in the IFW. 'Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

NON PATENT LITERATURE DOCUMENTS				
Examiner Initials	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²	
	CA	PCT/ISA/210 - INTERNATIONAL SEARCH REPORT		

^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Examiner	Date	
Signature	Considered	

¹Applicant's unique citation designation number (optional). 2Applicant is to place a check mark here if English language Translation is attached.